in front. The majority (86%) reported that it was somewhat-extremely unlikely they would be caught by police if following too closely, indicating a perceived lack of enforcement for this offence. Reasons for this included perceptions of difficulty for police to enforce this offence (5%), not having heard of anyone being caught for this offence (17%), and other police priorities (30%).

Conclusions This study is part of a larger research project that aims to improve knowledge about driving conditions, patterns and locations, and driver behaviours that lead to driving at unsafe headways (i.e. following too closely). Recommendations for use of these findings to inform driver education and awareness campaigns are discussed.

861 INFLUENCE OF THE BUILT ENVIRONMENT ON CRASHES INVOLVING PEDESTRIANS IN COMPLEX URBAN AREAS

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Background On urban roads, road users interact in a highly complex environment. Few previous multivariable studies investigated the association between the built urban environment (including the road, roadside and human activity) and crashes. Roadside design and amenities and facilities that impact road user movements were rarely considered. This research aimed to identify characteristics of the built urban environment associated with the frequency of pedestrian-vehicle casualty crashes (PVC) on shopping strips in metropolitan Melbourne, Australia.

Methods The study had a cross-sectional design. Strip shopping arterial road segments in Melbourne, Australia, were identified ($n = 142$). Data were collected for a broad range of potential risk factors relating to the road, roadside and human activity. Analysis using Poisson regression identified factors associated with PVC frequency. Diagnostic tests were conducted to assess model fit.

Results From 2005 to 2009 there were 519 (median = 5.4/km) PVC on the 142 midblock road segments. Aspects of the built environment associated with increased PVC frequency were: road width, unsignalised intersections, medians or traffic islands, midblock pedestrian crossings, roadside development height, off-street parking facilities, establishments with a late night liquor license, railway stations and tertiary education institutions. Lane width and parking clearways were associated with significant reductions in PVC. Speed limits were associated with PVC in a non-linear fashion. There was no association between traffic volume or estimated pedestrian activity and PVC.

Conclusions A range of risk factors were related to PVC on strip shopping road segments including traditionally studied characteristics like road design and less commonly studied aspects such as the roadside and facilities and amenities on the road segment. This study can contribute to the design of PVC countermeasures and better risk assessment tools for urban road segments.

862 MYANMAR ROAD SAFETY SITUATION 2015: AN URGENT ISSUE FOR THE NATION

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Background The estimated road traffic injury death rate in Myanmar increased rapidly from 15 per per 100,000 pop in 2013 to 20.3 in 2015. This recent death rate is 2nd only to Thailand within the Region. A great change from the 6th rank in 2013.

Description of the problem and activities In 2015, the policy maker in the WHO SEARO being informed of the rapid increase reacted in response to the information by reassigning the Regional advisor to Myanmar WHO office and mobilised 16,000 USD for intervention. With the seed money and limited time available, a multisectoral road safety project was initiated by the WHO office and the injury prevention focal point from the MOH with the focus on the Yangon – Nay pyi taw – Mandalay Express highway due to the more public awareness and concerned at the national level. This will serve as a pilot project for a larger scale intervention afterwards. The project has very tensed time limitation to finalise all activities within less than 6 months. The project started with a multisectoral meeting among important stakeholders. This already has drawn the attention of the media as news was disseminated. The frame work of the project is the 5 pillars of the Decade of Action for Road Safety 2011–2020. The major activities of the project are 1) close and regular collaboration with the National road safety committee, the transport and police authority 2) secondary data collection from existing combine data sources 3) road safety data workshop 4) journalist workshop 5) “Black Spot” road signage project 6) training of traffic police trainers on preventing road traffic injuries. 7) workshop on strategy development on road safety in collaboration with the ADB.

Results The activities are ongoing. The output, outcome, impact and lessons learned will be presented in the conference.

Conclusions Myanmar road safety situation 2015 is an urgent issue for the nation.

863 UNDERSTANDING THE PROFILE OF INJURIES FOR VULNERABLE ROAD USERS: A DATA LINKAGE STUDY

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Background Unless substantial gains are made in the prevention of road crashes, they will become the third ranked global burden of disease and injury by 2020. A growing proportion of this burden relates to vulnerable road users (e.g., motorcyclists, cyclists, and pedestrians). In order to reduce this burden, there is a need to fully understand the nature and contributing circumstances of crashes and the resulting injuries. While police-reported crash data contain detailed information about crash circumstances, they lack accurate information about the severity and nature of injuries which are included in hospital data. By bringing these data collections together using data linkage, the relationship between the characteristics of vulnerable road user crashes and their resulting injuries were explored.

Methods Data from the Queensland Road Crash Database (QRCD) and the Queensland Hospital Admitted Patients Data Collection (QHAPDC) for the year 2010 were linked. There were 1,382 police-reported motorcyclist injuries that linked to a hospital record (42% of all police-reported motorcyclist injuries), 429 cyclists (25%), and 644 (39%) pedestrians. The relationships between crash characteristics such as counterpart involvement, alcohol, fatigue, speed, and helmet use and injury severity (e.g.,